

Application Data Sheet

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R:: None
Sequence submission: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: None
Title:: **"Compositions and Methods for Genetic Analysis of Polycystic Kidney Disease"**
Attorney Docket Number:: 1133/2002
Request for Early Publication?: No
Request for Non-Publication?: No
Suggested Drawing Figure:: 1-13
Total Drawing Sheets:: 54
Small Entity:: Yes
Petition Included:: No
Secrecy Order in Patent No
Application?:

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: United States
Status:: Full Capacity

Given Name:: Jeffrey
 Middle Name:: G.
 Family Name:: Jones
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Jorge
 Middle Name:: A.
 Family Name:: Garces
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Jing

Middle Name::
 Family Name:: Wang
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: John
 Middle Name:: A.
 Family Name:: Curran
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 5 Gilman Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Susan
 Middle Name:: K.

Family Name:: Allen
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Kerry
 Middle Name:: E.
 Family Name:: Flynn
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Worcester
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Aidan
 Middle Name:: N.

Family Name:: Hennigan
 City of Residence:: Milbury
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 49 ½ Miles Street
 City of Mailing Address:: Milbury
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01527

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Norm
 Middle Name::
 Family Name:: Robichaud
 City of Residence:: Worcester
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 377 Plantation Street
 City of Mailing Address:: Leominster
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01605

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: United States
 Status:: Full Capacity
 Given Name:: Christopher
 Middle Name:: M.

Family Name:: Palatucci
 City of Residence:: Shrewsbury
 State or Providence of Residence:: Massachusetts
 Country of Residence:: United States
 Street of Mailing Address:: 21 Keyes House Road
 City of Mailing Address:: Shrewsbury
 State or Province of Mailing Address:: Massachusetts
 Postal or Zip Code of Mailing Address:: 01545

Correspondence Information

Correspondence Customer Number:: 29933

Representative Information

Representative Information Number::	29933
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional	60/328,739	October 12, 2001

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name:: Athena Diagnostics